

Patient Price List - Cardiology Hospital

CPT Code	Description	Prompt Pay Price (1)	Direct Pay Price (2)	Full Charge Amount (3)
99201	OUTPATIENT NEW 10 MINUTES	\$ 40	\$ 60	\$ 80
99202	OUTPATIENT NEW 20 MINUTES	\$ 76	\$ 113	\$ 151
99203	OUTPATIENT NEW 30 MINUTES	\$ 116	\$ 173	\$ 231
99204	OUTPATIENT NEW 45 MINUTES	\$ 196	\$ 293	\$ 391
99205	OUTPATIENT NEW 60 MINUTES	\$ 255	\$ 382	\$ 509
99211	OUTPATIENT VISIT 5 MINUTES	\$ 14	\$ 21	\$ 28
99212	OUTPATIENT VISIT 10 MINUTES	\$ 38	\$ 57	\$ 76
99213	OUTPATIENT VISIT 15 MINUTES	\$ 77	\$ 116	\$ 154
99214	OUTPATIENT VISIT 25 MINUTES	\$ 118	\$ 177	\$ 236
99215	OUTPATIENT VISIT 40 MINUTES	\$ 168	\$ 251	\$ 335
99221	INITIAL HOSPITAL CARE/DAY 30 MINUTES	\$ 153	\$ 229	\$ 305
99222	INITIAL HOSPITAL CARE/DAY 50 MINUTES	\$ 206	\$ 309	\$ 412
99223	INITIAL HOSPITAL CARE/DAY 70 MINUTES	\$ 305	\$ 458	\$ 610
99224	SBSQ OBSERVATION CARE/DAY 15 MINUTES	\$ 60	\$ 90	\$ 120
99225	SBSQ OBSERVATION CARE/DAY 25 MINUTES	\$ 110	\$ 164	\$ 219
99226	SBSQ OBSERVATION CARE/DAY 35 MINUTES	\$ 158	\$ 237	\$ 316
99231	SBSQ HOSPITAL CARE/DAY 15 MINUTES	\$ 59	\$ 89	\$ 118
99232	SBSQ HOSPITAL CARE/DAY 25 MINUTES	\$ 109	\$ 163	\$ 217
99233	SBSQ HOSPITAL CARE/DAY 35 MINUTES	\$ 157	\$ 235	\$ 313
99234	OBSERVATION/INPATIENT HOSPITAL CARE 40 MINUTES	\$ 201	\$ 302	\$ 402
99235	OBSERVATION/INPATIENT HOSPITAL CARE 50 MINUTES	\$ 254	\$ 381	\$ 508
99236	OBSERVATION/INPATIENT HOSPITAL CARE 55 MINUTES	\$ 328	\$ 491	\$ 655
99238	HOSPITAL DISCHARGE DAY,<30 MIN	\$ 109	\$ 164	\$ 218
99239	HOSPITAL DISCHARGE DAY,>30 MIN	\$ 116	\$ 174	\$ 232
99251	INPATIENT CONSULT NEW/ESTAB PT 20 MIN	\$ 176	\$ 263	\$ 351
99252	INPATIENT CONSULT NEW/ESTAB PT 40 MIN	\$ 207	\$ 311	\$ 414
99253	INPATIENT CONSULT NEW/ESTAB PT 55 MIN	\$ 239	\$ 358	\$ 477
99254	INPATIENT CONSULT NEW/ESTAB PT 80 MIN	\$ 295	\$ 442	\$ 589
99255	INPATIENT CONSULT NEW/ESTAB PT 110 MIN	\$ 351	\$ 527	\$ 702
93000	ELECTROCARDIOGRAM, COMPLETE	\$ 26	\$ 38	\$ 51
93015	CV STRS TST XERS&/OR RX CONT ECG W/SI&R	\$ 115	\$ 173	\$ 230
93016	CV STRS TST XERS&/OR RX CONT ECG W/O I&R	\$ 34	\$ 50	\$ 67
93018	CARDIAC STRESS TST,INTERP/REPT ONLY	\$ 22	\$ 33	\$ 44
93306	ECHO HEART XTHORACIC,COMPLETE W DOPPLER	\$ 345	\$ 518	\$ 690
93320	DOPPLER ECHO HEART,COMPLETE	\$ 82	\$ 123	\$ 164
93321	DOPPLER ECHO HEART,LIMITED,F/U	\$ 42	\$ 62	\$ 83
93325	DOPPLER COLOR FLOW VELOCITY MAP	\$ 39	\$ 58	\$ 77

The above prices are for physiciain cardiology services performed at a HonorHealth hospital. Prices listed do not include the hospital fees.

- (1) **Prompt Pay Price** is the avergae price a self-pay patient will pay when paid in full at the time the service is rendered.
- (2) **Direct Pay Price** is the average price a self-pay patient will pay for this service. Arrangements can be made to pay over time.
- (3) **Average Total Price** is the average total charges a person will experience when receiving this service.